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Written on NOVEMBER 29, 2012 AT 7:45 AM by VKREMER

Navy Medicine Commemorates World AIDS Day

Filed under COMMUNITY SUPPORT, FORCE HEALTH AND SAFETY, HEALTH (2 COMMENTS)

By Dr. Richard Shaffer, director, [Department of Defense HIV/AIDS Prevention Program](#)



HIV technical advisors from DHAPP trained military personnel in the Sudan People's Liberation Army as peer educators in South Sudan. The SPLA is one of 70 partner militaries that DHAPP currently supports around the globe. (Photo by Naval Health Research Center)

Communities and countries around the world will take time to commemorate World AIDS Day on December 1st. It is a time for all to reflect on our successes in the fight against HIV/AIDS, support those living with HIV, and remember those that have died from AIDS.

The U.S. Navy has a long tradition of being at the forefront of military medicine regarding infectious diseases in order to ensure that sailors are healthy to maintain force readiness. Since the beginning of the HIV/AIDS epidemic, Navy Medicine has made many important contributions to fighting this disease.

The Navy initiated HIV screening of all applicants for military service beginning in August of 1985, only months after the first screening test for the newly identified virus was developed. We began "force wide" HIV screening for active duty members two months later. Department

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of Defense leadership knew that they had to aggressively protect the health of the force, but also that the traditional military medicine needed to be engaged in the fight against this disease for the benefit of the entire nation and the world. In those early years, rates of HIV infection in military recruits and active duty members were some of the few “large population” numbers that existed to inform the nationwide medical community and the public about the early nature of the epidemic.

U.S. Navy researchers also made significant contributions to understanding the changing dynamics of HIV through typing and surveillance of the many variants of the virus as the epidemic continued its geographic progression around the world. Again, data from military researchers and clinicians uniquely informed the nationwide medical community and the public about the nature of the epidemic.

U.S. Navy personnel are often stationed or deployed overseas creating an initial concern that sailors were more at risk of HIV infection during stops at foreign ports. The [Naval Health Research Center](#) in San Diego, Calif., maintained all HIV screening results in the Navy. Researchers took this information, along with ship movement data of frequently visited foreign ports, to examine whether sailors were acquiring HIV during deployments. Results showed that despite the high mobility of Navy ships and its sailors, there were no increased risks of HIV infection in foreign ports. This important finding led to the added attention to the risk of sailors in home ports where a large number of HIV infections occurred.

Research such as this provided a firm foundation to wage war against HIV/AIDS, however, we knew to stop the spread of HIV in troops now we needed a “tool box” of interventions that could be implemented force-wide quickly, and more importantly were effective. The U.S. Navy led the military-wide effort in developing and implementing successful HIV/AIDS behavior change communication activities and comprehensive prevention. Modules incited behavior change and educated troops about the risk of HIV at home and on deployments. The Navy also created the first HIV prevention training specifically targeted toward those that already had HIV – *Prevention with Positives*. This strategy educates HIV positive troops and their families so that they know how to reduce the risk of transmitting HIV.

Due to the Navy’s expertise in HIV prevention, research, and clinical care, DoD, along with the Centers for Disease Control and Prevention and the U.S. Agency for International Development, was asked to participate in the U.S. Leadership and Investment in Fighting an Epidemic (LIFE) Initiative in 2000 to help fight the HIV/AIDS epidemic in Africa and India. The U.S. Navy was designated as the Executive Agent for the DoD LIFE Initiative, later to be renamed the [DoD HIV/AIDS Prevention Program \(DHAPP\)](#), with responsibility for program management assigned to the NHRC.

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Laboratory personnel from the Lesotho Defense Force (LDF) demonstrate the newly renovated lab capabilities to LDF officers. The DoD HIV/AIDS Prevention Program provides technical assistance and resource support to the LDF HIV prevention program. (Photo by Naval Health Research Center)

Pursuing HIV/AIDS activities with foreign militaries is clearly tied to security interests, regional stability, humanitarian concerns, counterterrorism, and peacekeeping efforts due to the impact of HIV/AIDS as a major destabilizing factor in developing countries. In fact, the Secretary of Defense identified HIV/AIDS in foreign militaries as a national security issue in the Security Cooperation Guidance.

Since 2003, DHAPP has played a key role in preventing HIV in foreign militaries through the U.S. President's Emergency Plan for [AIDS Relief \(PEPFAR\)](#) as the DoD implementing agency for the initiative. Foreign militaries frequently have HIV infections rates similar to the surrounding civilian populations, yet they remain a population with increased HIV risk factors, including high mobility and separation from partners. Due to security issues and the stigma surrounding HIV/AIDS, foreign militaries are typically more amenable to working with U.S. counterpart defense representatives. Therefore, the DoD plays a critical role in galvanizing foreign militaries to take preventative action against the spread of this disease.

DHAPP continues its efforts today to combat HIV/AIDS among respective military services implementing bilateral and regional strategies in coordination with respective Combatant Commands and PEPFAR Country Teams. Funding through PEPFAR and the Defense Health Program ensure that militaries around the world are not hindered by morbidity and mortality affecting deployment cycles and troop levels.

For more information, visit the [DoD HIV/AIDS Prevention Program \(DHAPP\)](#).

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